

The State Medical Education Board of Georgia

Scholarship Program



Applicant Information Bulletin

This document describes the State Medical Education Board of Georgia Scholarship Program. Program participants will be bound by contract to adhere to the provisions outlined in this document.

Please keep this Bulletin for future reference.

**STATE MEDICAL EDUCATION BOARD OF GEORGIA
SCHOLARSHIP PROGRAM**

PURPOSE OF THE PROGRAM

The State Medical Education Board Scholarship Program was created in 1952 to provide a supply of physicians for rural areas of the State and to help defray the cost of medical school for Georgia residents who desire to practice medicine in rural Georgia. The service repayable scholarship will provide up to \$20,000 per year to help pay the cost of medical school in return for a contractual obligation to practice medicine full-time (a minimum of 40 hours per week) in a Board-approved Georgia county with a population of 35,000 or fewer persons.

ELIGIBLE APPLICANTS

All applicants must be legal residents of the State of Georgia and citizens of the United States. In order for an application to be considered by the Board, the applicant must be accepted into an L.C.M.E. or A.O.A. accredited four-year medical school located in the United States offering the degrees of Doctor of Medicine or Doctor of Osteopathy (M. D. or D. O.). All scholarship recipients must pursue a course of study that will allow them to qualify for licensure by the Composite State Board of Medical Examiners of Georgia.

Successful applicants must exhibit a strong commitment to practice medicine in rural Georgia (a Board-approved Georgia county having a population of 35,000 or fewer persons). Additional priority will be given to those applicants who demonstrate financial need. The applicant is required to disclose his/her own financial information.

APPLICATION REQUIREMENTS

1. Completed application form
2. Completed Certificate of Residency (form provided)
3. Male applicants are required to submit evidence of having registered for Selective Service (form provided)
4. Financial information as to the inability of the applicant to finance his or her medical education (forms provided)
 - a. Applicants wishing to display substantial financial hardship should include a copy of his or her Student Aid Report (SAR), the official summary of the Free Application for Federal Student Aid (FAFSA)
5. Copy of most recent 1040 or 1040EZ Forms (or other applicable tax forms)
6. Letter of acceptance to an accredited medical school
7. Copy of personal statement from medical school application
8. Completed Authorization and Release Form (form provided)
9. Attend the formal applicant interviews conducted by the Board

The Board is charged with receiving and acting upon all applications for scholarships made by students who are residents of Georgia who desire to become doctors and who make a contractual commitment to practice medicine full-time in an approved Georgia community.

FINANCIAL HARDSHIP

Applicants wishing to display a substantial financial hardship should submit a copy of his or her Student Aid Report (SAR), the official summary of the Free Application for Federal Student Aid (FAFSA). This report will be used by the board in assessing the financial need of the applicant outside of the SMEB provided financial forms. Applicants need only include this report if he or she would like to demonstrate substantial financial need for scholarship funding.

CONTRACTUAL OBLIGATIONS

All scholarship recipients are required to sign a contract with the State Medical Education Board agreeing to the terms and conditions upon which the scholarships are granted. This contract establishes the amount of the scholarship award, the date of the contract and the corresponding census count used to determine eligible practice locations, as well as the terms and conditions of program participation pertaining to medical training, obligated service and the conditions of default and cash repayment.

For each year of full-time medical practice in a Board-approved Georgia county having a population of 35,000 or fewer persons, or at any hospital or facility operated under the jurisdiction of the Georgia Department of Human Resources, the Georgia Department of Corrections or the Georgia Department of Juvenile Justice, the recipient will receive credit for the amount of scholarship funds which he or she received during any one year in medical school. The authority for county populations is the Decennial Census Count of the United States Bureau of the Census effective at the time the scholarship contract is signed.

AWARDING AND FUNDING OF SCHOLARSHIPS

Scholarship funding is based upon the amount of funds appropriated to the State Medical Education Board by the Georgia General Assembly. The funding amount for scholarship awards during the 2008-2009 academic year will be up to \$20,000 each. Upon the submission of a signed contract and verification that the student is enrolled in the medical school named in said contract, scholarship funding is authorized. Scholarship funds are disbursed directly to the medical school to address yearly tuition and fees with any remaining funds being disbursed to the student by his/her medical school.

CONTRACT RENEWAL

The contract term is one year. Contracts may be renewed for additional one-year term for a maximum of four years. Each scholarship recipient is required to complete and submit an annual report to the Board concerning their status in training. The Annual Report includes:

- A. Current and valid name, address, telephone number, fax number and e-mail address
- B. Medical school enrollment status and verification of good academic standing
- C. Date of graduation
- D. Plans for specialization
- E. Continued interest and recommitment to rural practice

APPROVAL OF RESIDENCY PROGRAMS

In order to assure that recipients complete residency programs in specialties needed in rural Georgia, your selection of residency must have prior written approval by the Board. The medical practice obligation is deferred during the completion of an approved residency training program only if the Board has approved the residency.

SCHOLARSHIP REPAYMENT OBLIGATIONS

Each recipient is required to obtain Board approval of any proposed practice location. Credit for practice repayment is applied one year of funding for each year of service rendered in compliance with the repayment provisions of the scholarship contract. Practice without written Board approval will not be credited toward the satisfaction of the contractual service obligation.

The recipient must practice full-time, a minimum of forty hours per week, in the Board- approved practice location. If a recipient changes practice location for any reason, he/she must request Board approval of any subsequent practice location.

STUDENTS DISMISSED OR WITHDRAWN

In the event a scholarship recipient is dismissed from medical school for either academic or disciplinary reasons, or a recipient voluntarily withdraws from medical school, the scholarship recipient is immediately liable for all scholarship funds received, plus accrued interest at the rate stated in the scholarship contract.

CONTRACT DEFAULT

A scholarship recipient will be considered in default under the following circumstances:

- A. Failure to keep the Board informed of current address and telephone number
- B. Failure to submit reports, forms, transcripts, etc., as required by the Board
- C. Failure to obtain Board approval for graduate medical education
- D. Failure to obtain Board approval of practice location
- E. Failure to begin or complete approved practice obligation
- F. Failure to maintain a full-time (minimum of forty hours per week) medical practice
- G. Failure to obtain and maintain a valid medical license from the Composite State Board of Medical Examiners of Georgia

In the event the State Medical Education Board finds a scholarship recipient in default, the recipient is immediately liable for triple the principal amount of scholarship funds received.

PRACTICE LOCATION ASSISTANCE

In cooperation with other interested organizations and rural Georgia communities, the State Medical Education Board sponsors an annual Medical Fair. This function is designed to enable physicians to meet representatives from 35-40 qualifying rural Georgia communities to discuss practice opportunities in our State.

The Georgia Board for Physician Workforce maintains information pertaining to practice opportunities statewide. Many of these opportunities are rural locations eligible for repayment of the scholarship obligation. In addition, the staff of the State Medical Education Board, through contact with scholarship recipients in practice and rural Georgia communities, will provide information pertaining to practice opportunities from time to time. However, each scholarship recipient is responsible for securing a qualifying practice location for themselves. The SMEB IS NOT responsible for locating a suitable practice site for recipients.

OBTAINING AN APPLICATION

Applications are available from the State Medical Education Board at any time by phone request or on the website, www.smeb.georgia.gov. Completed applications should be received in the State Medical Education Board office no later than June 1st of each application year for consideration.



For applications or additional information, please contact:

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